Schedule E)	IVI EXI END	THORIES		PAGE 1 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
Working America Coalition			C	C00620583
Check if 24-hour report 48-hour report	X New rep	ort Amends repo	rt filed on	/ / D = D / Y = Y = Y
Full Name of Payee	·		Date of F	Public Distribution/Dissemination
Mosaic			M 10	
Mailing Address 4801 Viewpoint Place			Amount	
City	State	Zip Code		90.00
Cheverly	MD	20781		ion ID : D605326 Disbursement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004	10	
Name of Federal Candidate		✗ Support	Office Sought:	House District:
Rodham Clinton, Hillary, , ,		Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	288394.58	Disbursement For 2016 Other	or: Primary x General r (specify) ▶
Full Name of Payee			Date of F	Public Distribution/Dissemination
Mosaic			10	
Mailing Address 4801 Viewpoint Place			Amount	
City	State	Zip Code		90.00
Cheverly	MD	20781		on ID : D605327 Disbursement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004	^M 10	
Name of Federal Candidate		✗ Support	Office Sought:	House District:
Rodham Clinton, Hillary, , ,		Oppose	x President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7	288394.58	Disbursement For 2016 Othe	or: Primary X General r (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditu	ıres			180.00
(1) OUDTOTAL (11 ii i	10			7 1 7 1 7 1
(b) SUBTOTAL of Unitemized Independent Expen	ditures		•	7
(c) TOTAL Independent Expenditures			· •	7 1 7 1 7
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or it	date or authorized			
King, Crystal, , ,	[Electron	nically Filed] Date		23 2016
Olynatul e				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	Siledule Ly	FOR SE OF FORM 24/48
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
٧	Vorking America Coalition	C C00620583
Ch	neck if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
	Full Name of Payee	Date of Public Distribution/Dissemination
	Mosaic	10 22 7 2016
	Mailing Address 4801 Viewpoint Place	Amount
	City State Zip Code	300.00
	Cheverly MD 20781	Transaction ID : D605328 Date of Disbursement or Obligation
	Purpose of Expenditure Fliers Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Office	Sought: House District:
	Rodham Clinton, Hillary	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disbut 288394.58 Disbut 2016	rrsement For: Primary X General
		Other (specify) >
	Full Name of Payee Mosaic	Date of Public Distribution/Dissemination
	Mailing Address 4801 Viewpoint Place	10 22 2016 Amount
	City State Zip Code	135.00
	Cheverly MD 20781	Transaction ID : D605329
	Purpose of Expenditure Fliers Category/ Type 004	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate Support Office	e Sought: House District:
	D # 00 + 100	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought Disbut 288394.58	orsement For: Primary General Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures	435.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	
	(c) TOTAL Independent Expenditures	
	Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	King, Crystal, , , [Electronically Filed] Date 1	
	Signature	

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OF

Schedule E)	LIVI EXI LIVE	TOTIES		PAGE 3 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Working America Coalition			C	C00620583
Check if 24-hour report 48-hour report	X New rep	port Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
Mosaic			10	22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4801 Viewpoint Place			Amount	
City	State	Zip Code		90.00
Cheverly	MD	20781	Transaction II Date of Disbut	
Purpose of Expenditure Fliers		Category/ Type 004	10	22 / 2016
Name of Federal Candidate		✗ Support	Office Sought:	House District:
MCGINTY, KATHLEEN, ALANA, ,		Oppose	President X	Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	.,.,	9817.00	Disbursement For: 2016 Other (spe	Primary General ecify) ■
Full Name of Payee			Date of Public	Distribution/Dissemination
Mosaic			10	22 / 2016
Mailing Address 4801 Viewpoint Place			Amount	
City	State	Zip Code		90.00
Cheverly	MD	20781	Transaction ID Date of Disbu	: D605331 rsement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004	10	22 / 2016
Name of Federal Candidate		Support	Office Sought:	House District:
TRUMP, DONALD, J., ,		x Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		288394.58	Disbursement For: 2016 Other (spe	Primary ✗ General ecify) ▶
(a) SUBTOTAL of Itemized Independent Expen	ditures			180.00
			-	4
(b) SUBTOTAL of Unitemized Independent Exp	enditures		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorize			
King, Crystal, , ,	[Electron	nically Filed] Date	10 23	2016
Signature				

Schedule E)	TOTILO	PAGE 4 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Working America Coalition		C C00620583
Check if X 24-hour report 48-hour report X New repo	rt Amends report filed	I on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Mosaic		10
Mailing Address 4801 Viewpoint Place		Amount
City State 2	Zip Code	300.00
	20781	Transaction ID : D605332 Date of Disbursement or Obligation
Purpose of Expenditure Fliers	Category/ Type 004	10 22 / 2016
Name of Federal Candidate	Support Office	e Sought: House District:
MCGINTY, KATHLEEN, ALANA, ,	Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	9817.00 Disb 2016	ursement For: Primary ★ General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mosaic		10 22 / 2016
Mailing Address 4801 Viewpoint Place		Amount
City State	Zip Code	59.40
Cheverly MD	20781	Transaction ID : D605333 Date of Disbursement or Obligation
Purpose of Expenditure Fliers	Category/ Type 004	10 / 22 / Y Y Y Y Y Y
Name of Federal Candidate	🗶 Support Offic	e Sought: House District:
MCGINTY, KATHLEEN, ALANA, ,	Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	9817.00 Disb 2016	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	····	359.40
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	·····	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
King, Crystal, , , [Electronic	cally Filed] Date	10 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

				FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Working America Coalition				C C00620583
Check if 24-hour report 48-ho	our report New rep	ort Amends repo		M
Full Name of Payee			Date	of Public Distribution/Dissemination
Mosaic				10 22 2016
Mailing Address 4801 Viewpoint Place	e		Amou	nt
City	State	Zip Code	— IT.	135.00
Cheverly	MD	20781		saction ID : D605334 of Disbursement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004		10 22 2016
Name of Federal Candidate		✗ Support	Office Sough	nt: House District:
Rodham Clinton, Hillary, , ,		Oppose	✗ Presid	
Calendar Year-To-Date Per Election for Office Sought		288394.58	Disbursemer 2016	at For: Primary X General other (specify) ▶
Full Name of Payee Mosaic				of Public Distribution/Dissemination
Mailing Address 4801 Viewpoint PI	ace		L	10 22 2016
			Amou	ınt
City	State	Zip Code		135.00
Cheverly	MD	20781		action ID : D605335 of Disbursement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004		10 22 2016
Name of Federal Candidate		x Support	Office Sough	nt: House District:
MURPHY, PATRICK, , ,		Oppose	Presid	ent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		95023.87	Disbursemer 2016	nt For:
(a) SUBTOTAL of Itemized Independent	ent Expenditures		•	270.00
(b) SUBTOTAL of Unitemized Indepen	ndent Expenditures			
(c) TOTAL Independent Expenditures.			· •	7 7
Under penalty of perjury I certify that with, or at the request or suggestion of party committee) any political party co	f, any candidate or authorized			
King, Crystal, , ,	[Electron	ically Filed] Date	M M /	23 2016
Signature				

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Working America Coalition	C C00620583
Check if X 24-hour report 48-hour report New report Amends report	t filed on Man / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Mosaic	10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4801 Viewpoint Place	Amount
City State Zip Code	59.40
Cheverly MD 20781	Transaction ID : D605336 Date of Disbursement or Obligation
Purpose of Expenditure Fliers Category/ Type 004	10 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
TOOMEY, PATRICK, JOSEPH, ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 9817.00	Disbursement For: Primary ✓ General Other (specify) ✓
Full Name of Payee Mosaic	Date of Public Distribution/Dissemination
Mailing Address 4801 Viewpoint Place	10 22 2016 Amount
City State Zip Code	720.00
Cheverly MD 20781	Transaction ID: D605337 Date of Disbursement or Obligation
Purpose of Expenditure Fliers Category/ Type 004	10 22 / 2016
Name of Federal Candidate Support	Office Sought: House District: 04
KIHUEN, RUBEN, , , Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 16532.40	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures	779.40
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	·
Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
King, Crystal, , , [Electronically Filed] Date	10 23 2016
Signature	

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Schedule E)	NDENT EXPEND	ITORLS	PAGE 7 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Working America Coalition			C C00620583
Check if 24-hour report 48-hour rep	ort New rep	ort Amends repo	ort filed on
Full Name of Payee The Pivot Group, Inc.			Date of Public Distribution/Dissemination
Mailing Address 1720 I Street, NW #550			10 22 2016 Amount
City Washington	State DC	Zip Code 20006	8116.06 Transaction ID : D605348
Purpose of Expenditure Fliers		Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate		x Support	Office Sought: House District: 03
ROSEN, JACKY, , , , Calendar Year-To-Date		Oppose 10796.04	President Senate State: NV Disbursement For: Primary General 2016
Per Election for Office Sought Full Name of Payee	7 7	10796.04	Other (specify) ▶ Date of Public Distribution/Dissemination
The Pivot Group, Inc. Mailing Address 1720 Street, NW #550			10 22 7 2016
17201041004,1001	0.1	7: 0 1	Amount
City Washington	State DC	Zip Code 20006	Transaction ID : D605349 Date of Disbursement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004	10 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate KIHUEN, RUBEN, , ,		Support Oppose	Office Sought: House District: 04 President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		16532.40	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Ex	penditures		▶ 16908.46
(b) SUBTOTAL of Unitermized Independent	Expenditures		-
(c) TOTAL Independent Expenditures			•
	candidate or authorized		not made in cooperation, consultation, or concert of either, or (if the reporting entity is not a political
King, Crystal, , ,	[Electron	ically Filed] Date	23 / 2016

Schedule E)	DENT EXICIO	TIONES		PAGE 8 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Working America Coalition			С	C00620583
Check if 24-hour report 48-hour repo	rt New rep	port Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee The Pivot Group, Inc.			M = M	c Distribution/Dissemination
Mailing Address 1720 I Street, NW #550			Amount	22 2016
0.1	01-1-	7:- 0-1-		40000 40
City Washington	State DC	Zip Code 20006	Transaction Date of Dish	16908.46 ID: D605350 ursement or Obligation
Purpose of Expenditure Fliers		Category/ Type 004	10 10	/ 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought:	House District:
CORTEZ MASTO, CATHERINE, , ,		Oppose		Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		43583.96	Disbursement For: 2016 Other (sp	Primary ✗ General pecify) ▶
Full Name of Payee The Pivot Group, Inc.			M - M	ic Distribution/Dissemination
Mailing Address 1720 I Street, NW #550			10	22 2016
City	State	Zip Code		16908.46
Washington	DC	20006	Transaction I	
Purpose of Expenditure Fliers		Category/ Type 004	10	22 / 2016
Name of Federal Candidate		x Support	Office Sought:	House District:
Rodham Clinton, Hillary, , ,		Oppose	✗ President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		288394.58	Disbursement For: 2016 Other (s	Primary X General pecify) ▶
(a) SUBTOTAL of Itemized Independent Expe	enditures		·	33816.92
(b) SUBTOTAL of Unitemized Independent Ex	kpenditures		•	
(c) TOTAL Independent Expenditures			•	52929.18
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any committee) any political party committee	andidate or authorize			
King, Crystal, , ,	[Electron	nically Filed] Date	10 / 23	2016